CITIES OF SOUTH SAN FRANCISCO – SAN BRUNO
WASTEHAULER DISCHARGE PERMIT APPLICATION

WATER QUALITY CONTROL PLANT
ENVIRONMENTAL COMPLIANCE PROGRAM
195 BELLE AIR ROAD
SOUTH SAN FRANCISCO, CA 94080
(650) 877-8555 FAX (650) 829-3855

Applicant's Business Name:_____

Applicant's Business Address:

_____
(Street) (City) (State) (Zip Code)

Mailing address (if different from above):

_____
(Street) (City) (State) (Zip Code)

Name of Owner of Truck (s):_____

Person to be contacted about this Application:

_____
(Name) (Title)

_____
(Phone) (Email)

Person to be contacted in case of emergency:

_____
(Name) (Title) (____) (Office Phone) (____) (Cell Phone)

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Enter information for each truck your company plans to have discharge at the treatment plant.

Truck Number	License Plate	Gallon Capacity

Type of wastes discharged to treatment plant: _____

_____

_____

_____

Does your company clean, sanitize or remediate any facilities that, manufacture, produce, mix, formulate or discharge any hazardous wastes?: YES NO (circle one)

Does your company do subcontract work for other companies? YES NO (circle one)

City of South San Francisco Business License Number: _____

San Mateo County Permit Number: _____

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Your company is responsible for all wastes discharged to the treatment plant. If your discharge violates any discharge limits you will be held responsible for any fines, penalties or other actions including but not limited to revocation of your discharge permit.

CERTIFICATION: Please read carefully and sign.

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

(Signature)	**(Date)**
(Print Name)	**(Title or Position)**